

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AA	12192	4/6/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	eg	121615	6-5-00 8-10-00

INDEX OF CLAIMS

- ✓

.....

Rejected
- =

.....

Allowed
- (Through numeral).....

Canceled
- ÷

.....

Restricted
- N

.....

Non-elected
- I

.....

Interference
- A

.....

Appeal
- O

.....

Objected

Claim		Date	
Final	Original		
1	2		
3	4		
5	6		
7	8		
9	10		
11	12		
13	14		
15	16		
17	18		
19	20		
21	22		
23	24		
25	26		
27	28		
29	30		
31	32		
33	34		
35	36		
37	38		
39	40		
41	42		
43	44		
45	46		
47	48		
49	50		

Claim		Date	
Final	Original		
51	52		
53	54		
55	56		
57	58		
59	60		
61	62		
63	64		
65	66		
67	68		
69	70		
71	72		
73	74		
75	76		
77	78		
79	80		
81	82		
83	84		
85	86		
87	88		
89	90		
91	92		
93	94		
95	96		
97	98		
99	100		

Claim		Date	
Final	Original		
101	102		
103	104		
105	106		
107	108		
109	110		
111	112		
113	114		
115	116		
117	118		
119	120		
121	122		
123	124		
125	126		
127	128		
129	130		
131	132		
133	134		
135	136		
137	138		
139	140		
141	142		
143	144		
145	146		
147	148		
149	150		

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)